



County of Los Angeles Department of Parks and Recreation
East County Community Services Agency
East Los Angeles / La Puente Recreation



EAST L.A.



Metro

BICYCLE RIDE

**BICYCLE
DECORATING
CONTEST.
WIN A PRIZE!**

Saturday, September 7, 2013

Check-In: 8:30a.m.

Bike Ride: 10:00a.m.

Bicycle Helmet Required for all riders.

4801 E. 3rd. Street

Los Angeles, CA 90022

(323) 260-2360



Pre

**Parks
Make
Life
Better!**

-Registration will be taken

Monday - Friday

at the Parks and Recreation office

located in the E.L.A Civic Center

Between the hours of

Name: _____ Age: _____ Date of Birth: ____/____/____
Address: _____ City: _____ Zip Code: _____
Telephone #: _____ Email Address: _____

Emergency Contact Other Than Parents:

Name: _____ Telephone #: _____ Relationship: _____

I hereby release the County of Los Angeles Department of Parks and Recreation, its officers, agents, servants, assignees, employees, or volunteers from any liability or responsibility for any death or injuries that participant might sustain while participating in any activity connected in any way with the **East Los Angeles Bike Ride**. Additionally, I know and understand the risk cause by terrain, facilities, temperature, weather, defective equipment, vehicular traffic and actions or other people.

CONSENT TO TREATMENT OF MINOR: In the event of sudden illness, accident, or injury which may occur while the said minor is engaged in any activity supervised by the County of Los Angeles Department of Parks and Recreation and its representatives, agents, or assignees, when neither the parent nor guardian can be contacted, I hereby give consent pursuant to California Family Code Section 6910 and California Civil Code 25.8 for emergency treatment as shall be necessary under the circumstances by any physician licensed under the laws of the State of California.

Signature: _____ Date: ____/____/____

Title VI Compliance

The County of Los Angeles Department of Parks and Recreation is a sub recipient of Federal Assistance. If you feel you have been subject to discrimination on the basis of race, color, national origin, age sex, or handicap, you may file a complaint with the County of Los Angeles Department of Parks and Recreation, 433 South Vermont Avenue, Los Angeles, California 90020, or the Office of Equal Opportunity, United States Department of Interior, Washington D.C.

ADA Notice

Pursuant to the Americans with Disability Act (ADA) this Department has designated an ADA coordinator to effect compliance with the non-discriminatory provisions of the ADA. Upon 3 day request/notice, sign language interpretation and related materials in alternative formats (Braille-transcript, large print, audio-record, etc.) or other reasonable accommodations are available for County sponsored activities.

ADA Coordinator: Tel. 213-738-2970 TDD: 213-427-6118 FAX: 213-487-0380

Image (Picture) Release

In consideration of my minor child/ward being allowed to participate in any way in the County of Los Angeles Department of Parks and Recreation program, related events and activities, the undersigned agrees that such participants likeness may be photographed and that such image may be used on the county's Website, or in official county publication or displays, public newspapers, magazines, reports, or other public document; or electronic or digital recordings.

Name (print minors name): _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

Staff Use Only

ID # _____

Route _____